

**NATURAL RESOURCES AND ENVIRONMENTAL PROTECTION CABINET
DEPARTMENT FOR ENVIRONMENTAL PROTECTION
DIVISION OF WASTE MANAGEMENT
SOLID WASTE BRANCH
14 REILLY ROAD
FRANKFORT, KY 40601-1190**

BENEFICIAL REUSE OF A SOLID WASTE

Introduction

This form is to be completed and submitted to the Division of Waste Management by those individuals or companies intending to reuse a solid waste in a manner beneficial to the environment. This form is not applicable for commercial recycling operations or for the disposal of waste. Applicants are expected to understand and comply with all laws and regulations relating to solid waste facilities in the Commonwealth of Kentucky (reference KRS 224 and 401 KAR 47).

Please type or print legibly in ink. Address all items in the application. Incomplete or incorrectly prepared applications will be returned for correction. Submit the original and two (2) copies of both the form and all requested attachments. Written questions may be directed to the Division of Waste Management at the address listed above or you may call (502) 564-6716 for assistance.

The Cabinet does not discriminate on the basis of race, color, national origin, sex, religion, age, or disability in employment or the provision of services. Upon request, the Cabinet will provide reasonable accommodations including auxiliary aids and services necessary to afford individuals with disabilities an equal opportunity to participate in programs and activities. To request an alternate format for this application, contact the Solid Waste Branch at (502) 564-6716.

**DEP 7098
7/9/99**

Section I
Applicant Information

1. Name of person or company proposing the reuse
2. Address
3. City_____ 4. State_____ 5. Zip
6. Contact Person_____ 7. Title
8. Phone Number_____ 9. Fax Number
10. Tax Identification Number (if applicable)

Section II
Facility/Site Information

1. Facility/Site Name
2. Property Owner_____ 3. Phone Number
4. Contact Name_____ 5. Title
6. Contact Phone Number_____ 7. Fax Number
8. Facility Address (if different from above)
9. City_____ 10. State_____ 11. Zip

12. Latitude_____ 13. Longitude_____ 14. County

15. Nearest Highway Intersection

16. Nearest Community

17. USGS quadrangle map name (see Section VI)

Section III
Sponsoring Engineering Firm (if applicable)

1. _____ Company _____ Name _____
2. _____ Address _____
3. City _____ 4. State _____ 5. Zip _____
6. County _____ 7. Phone Number _____
8. Fax Number _____ 9. Company Tax Number _____
10. Contact Person _____ 11. Title _____
12. Phone Number _____ 13. Fax Number _____

Section IV
Activity Information

1. What is the approximate area affected by the operation?
Acres _____
2. What is the approximate amount of waste to be reused monthly?
Tons _____
3. What is the total amount of waste to be reused over the lifetime of the project? _____ Tons
4. Give a detailed explanation of the proposed beneficial reuse. Include a description of the waste, the personnel and equipment to be used in the process, the method of reuse, and a summary of how the reuse is beneficial to the environment. If more space is needed, attach additional pages and label as Attachment 1.

5. Enter the requested information below:

Source of Waste
(i.e. county)

Type of Waste
(residential, commercial,
industrial)

**Monthly
Quantity**
(tons)

Section V

Applicant Certification

"I certify that this document and all attachments are to the best of my knowledge and belief, true, accurate, and complete. I understand that there are significant penalties for submitting false information including fines and imprisonment."

1. **Signature** **of** **property** **owner** **(see** **Section** **VI)**

2. Owner Name (print)_____ 3. Date

Notary Statement

4. Subscribed and sworn to before me by

this the_____ day of_____ 199

5. Notary Public signature

6. My Commission Expires

**Section VI
Attachments**

1. Submit and label as Attachment 2 an original and two copies of a site plan drawing. Show all the property boundaries, buildings, roads, and landmarks of the area where the beneficial reuse is to take place.
2. Submit and label as Attachment 3 a USGS 7.5 minute topographic map and two copies of the map showing the location of the proposed activity. Outline the property boundaries of the area where the beneficial reuse is to take place. Maps may be ordered by writing to Map Sales, 133 Holmes Street, Frankfort, KY 40601 or by calling (502) 564-4715. You may also contact your local conservation district or county agricultural extension agent to obtain these maps.
3. If the property owner is not the applicant, and the property owner has not signed the applicant certification (Section V, 1), then the applicant must submit the following notarized statement signed by the property owner (label as Attachment 4):

"I am aware of the beneficial reuse project that has been proposed for my property and I have been given a copy of the application outlining this project. I hereby give permission for this project to proceed and I understand

that I am fully liable in case of failure for any reason by the applicant to comply with the requirements of KRS Chapter 224 or 401 KAR Chapters 47 and 48 including any enforcement actions by the Cabinet concerning this project."